

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 07/699,479 FILING DATE 5/15/91
APPLICANT(S) Fosnaugh

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1		1		1	
3	1		1		1	
4	1		1		1	
5	1		1			
6	1		1		1	
7	1		1		1	
8	1		1		1	
9	1		1		1	
10	1		1		1	
11	1		1			
12	1		1			
13	1		1		1	
14	1		1		1	
15	1		1		1	
16	1		1		1	
17	1		1		1	
18			2		1	
19			1		1	
20			1		1	
21			1		1	
22			1		1	
23			2		1	
24			1		1	
25			1		1	
26			1		1	
27			1		1	
28			1		1	
29			1		1	
30			1		1	
31			1		1	
32			1			
33			1			
34			1			
35			1			
36			1			
37			1			
38			1			
39			1			
40			1			
41			1			
42			1			
43			1			
44			1			
45			1			
46			1			
47			1			
48					1	
49					1	
50					1	
TOTAL IND.	4		10		10	
TOTAL DEP.	13	←	46	←	28	←
TOTAL CLAIMS	17		56		38	